09/19/01

09-20-01

In the United States Patent and Trademark Office

Mailed 189 Sept 12, 200/

Og/955671

1	Assistant Commissioner for Patents		
	Washington, District of Columbia 20231		
	Sir.		
	Please file the following enclosed patent application papers: Applicant #1, Name: SAIL KATTA REDDY		
	Applicant #2, Name:		
•	TITLE DOUGH PERFORATOR METHOD AND USE		
	Specification, Claims, and Abstract. Nr. of Sheets 12 (TWELVE)		
	A Declaration: Date Signed: Sept 12, 2001		
	□ Drawing(s): Nr. of Sheets Enc.: Formal:Informal: 1 (ONE)		
	Assignment enclosed with cover sheet and recordal fee; please record and return.		
	Check for \$ 355 for:		
	M \$ 3.55 for filing fee (not more than three independent claims and twenty total claims are presented).		
	\$additional if Assignment is enclosed for recordal.		
	☐ Disclosure Document Program reference letter.		
	Pursuant to 35 U.S.C. §119(e)(i), applicant(s) claim priority of Provisional Patent Application Ser. Nr		
	filed		
,	Return Receipt Postcard Addressed to Applicant #1.		
	ZS. Request Under MPEP § 707.07(j): The undersigned, a pro se applicant, respectfully requests that if the Examiner finds patentable subject matter disclosed in this application, but feels that Applicant's present claims are not entirely suitable, the Examiner draft one or more allowable claims for applicant.		
	Very respectfully,		
	Pailkatta Reddy		
	Applicant #1 Signature Applicant #2 Signature		
	1010 N DIVISION ST Address (Send Correspondence Here) Address		
	Address (Send Correspondence Here) Address		
	URBANA, IL 61801		

Express Mail Label #

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Date of Denosit to Sept. 12, 2001

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Box Patent Application
Assistant Commissioner for Patents
Washington, District of Columbia 20231

Fee Transmittal

First-Named Applicant SAIL KATTA REDDY			
Title of Invention: " DOUGH PERFORATOR METHOD AND USE "			
Total Payment Enclosed (From Calculation Below): \$ 355.00			
Sir:			
Enclosed is the following small entity filing fee for the above patent application:			
Fee Code Fee Description Fee (\$)			
214	Provisional Pat. Appn. Filling Fee		
201	Basic Utility Appn. Filing Fee	355	
206	Basic Design Appn. Filing Fee		
	. Subtotal (1)	355	
	0 11		
203	Total Claims: 9 -20 = 1; X (fee for each claim over 20) =	<u></u>	
202	Tot. Indep. Claims _ 2 - 3 = O 1 ; X (fee for each indep. claim over 3) =	_ <u>\$</u>	
	Subtotal (2)		
Total Payment Enclosed (Sum of Subtotals (1) and (2)) \$ 255.00			
Very respectfully, Lail Katha Roldy SMindure of First-Named Applicant SAIL KATTA REDDY Print Name of Print-Named Applicant 1010 N. DIVISION ST Address VRBANA, I. 61801.			